

PART B - FEE(S) TRANSMITTAL

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20306

7590

05/17/2007

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300 S. WACKER DRIVE
32ND FLOOR
CHICAGO, IL 60606

06/08/2007 HDEMESSE 00000106 10630508

01 FC:1501 1400.00 OP
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<u>Carter Huith</u>	(Depositor's name)
<u>Carter Huith</u>	(Signature)
<u>6-01-07</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/630,508	07/29/2003	Carl A. Priddy	03-709	7905

TITLE OF INVENTION: METHOD AND SYSTEM FOR CREATING AN IMAGE MASK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	08/17/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
DANG, DUY M	2624	382-173000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. McDonnell Boehnen
2. Hulbert & Berghoff LLP
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ventana Medical Systems, Inc Tucson, AZPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 132490 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Thomas A. Fairhall

Date

June 1, 2007

Typed or printed name

Thomas A. Fairhall

Registration No.

34,591

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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UNITED STATES PATENT AND TRADEMARK OFFICE
(Case No. 03-709)

In the Application of:)
)
Carl A. Priddy) Group Art Unit: 2624
)
Serial No.: 10/630,508)
) Examiner Duy M. Dang
Filed: July 29, 2003)
)
For: Method and System for Creating an)
Image Mask) Confirmation No.: 7905

TRANSMITTAL LETTER

Mail Stop Issue Fees
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In regard to the above identified application:

1. We are transmitting herewith the attached:

1. Issue fee transmittal form PTOL-85
2. Check in the amount of \$ 1,730
3. Return Postcard

2. With respect to additional fees:

- A. ☐ No additional fee is required.
- B. ☒ Attached is a check in the amount of \$ 1,730.00.
- C. ☐ Charge the total additional fee to our Deposit Account No. 13-2490.

3. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2490. A duplicate copy of this sheet is enclosed.

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By: Thomas A. Fairhall
Thomas A. Fairhall
Reg. No. 34,591